



03-16-09

ABELMAN, FRAYNE & SCHWAB

Attorneys at Law
666 Third Avenue
New York, New York 10017-5621

Telephone: (212) 949-9022
Facsimile: (212) 949-9190
e-mail@lawabel.com

March 13, 2009

Mail Stop Issue Fee

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir/Madam:

We enclose our check in payment of the issue fee on the following application.

APPLICANT: FARINA et al.

CASE: 207,215

SERIAL NO.: 10/550,483

FILED: June 16, 2006

TITLE: PYRROLOIMIDAZOLE DERIVATIVES, THEIR PREPARATION, PHARMACEUTICAL
COMPOSITION CONTAINING THEM, AND THEIR USE AS NOOTROPIC AGENTS

ASSIGNED TO: NEUROTUNE AG

ALLOWED: December 31, 2008

with 16 claim

ISSUE FEE DUE: March 31, 2009

AMOUNT: \$1055.00 (Incl. Pub. Fee)

PRIORITY: ☒ Claimed herein

Country: IT Appln. No.: MI 2003A000573 Filed: March 24, 2003

Certified copy: ☒ already filed

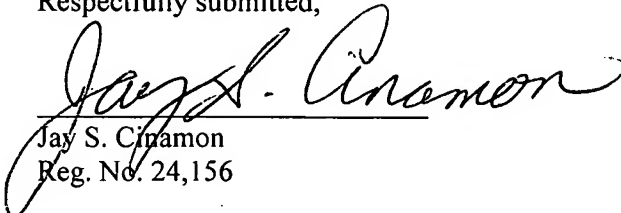
SMALL ENTITY STATUS: YES

We await the receipt of the issue notification and the Letters Patent Document.

JSC:so

Respectfully submitted,

Enclosed Check No. 22975


Jay S. Cinnamon
Reg. No. 24,156

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Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE
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MAR 13 2009

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Jay S. Cinamon (Depositor's name)
Jay S. Cinamon (Signature)
March 13, 2009 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/550,483	06/16/2006	Carlo Farina	207,215	4662

TITLE OF INVENTION: PYRROLOIMIDAZOLE DERIVATIVES, THEIR PREPARATION, PHARMACEUTICAL COMPOSITION CONTAINING THEM, AND THEIR USE AS NOOTROPIC AGENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	03/31/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHAMEEM, GOLAM M	1626	514-387000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

NEUROTUNE AG

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

8952 Schlieren-Zurich, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☒ A check is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-0035 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date March 13, 2009

Typed or printed name

Jay S. Cinamon

Registration No. 24,156

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